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confidentialto: Mail Stop Appeal Brief - Patents  
U.S. Patent and Trademark Office

from: John A. Wiberg

date: October 6, 2008

user ID: 8058

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matter: 13398US02

fax number: (571) 273-8300

number of pages including cover page: 25

## notes/comments:

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John A. Wiberg  
Reg. No. 44,401

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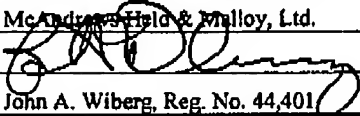
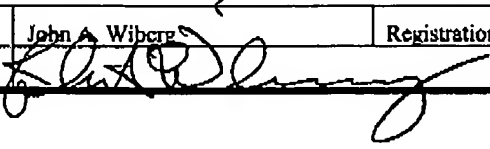
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PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	10/786,195			
		Filing Date	February 25, 2004			
		First Named Inventor	Alexander G. MacInnis			
		Art Unit	2193			
		Examiner Name	David H. Malzahn			
Total Number of Pages in This Submission	24	Attorney Docket Number	13398US02			
<b>ENCLOSURES (check all that apply)</b>						
<table border="0"> <tr> <td style="vertical-align: top;"> <input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53         </td> <td style="vertical-align: top;"> <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD         </td> <td style="vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Return-Receipt Postcard  <input type="checkbox"/> Other Enclosure(s) (please identify below):         </td> </tr> </table>				<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>						
Firm	McAndrews Held & Malloy, Ltd.					
Signature						
Printed Name	John A. Wiberg, Reg. No. 44,401					
Date	October 6, 2008					
<b>CERTIFICATE OF FAX TRANSMITTAL</b>						
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Signature			Date October 6, 2008			

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Approved for use through 6/30/2010. OMB 0651-0032

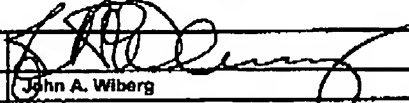
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<b>Effective on 09/30/2007</b> <b>Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818)</b> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2008</h3>		<b>Complete if Known</b>					
		Application Number	10/768,195				
		Filing Date	February 25, 2004				
		First Named Inventor	Alexander G. MacInnis				
		Examiner Name	2193				
		Art Unit	David H. Malzahn				
		Attorney Docket No.	13398US02				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27							
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1650							
<b>METHOD OF PAYMENT (check all that apply)</b>							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held &amp; Malloy</u>							
For the above-identified deposit account, the Director is hereby authorized to (check all that apply)							
<input checked="" type="checkbox"/> Charge Fee(s) indicated below		<input type="checkbox"/> Charge Fee(s) Indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>							
<b>FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES		Small Entity					
Fee Description	Fee(\$)	Fee(\$)	Fee(\$)				
Each claim over 20 (including Reissues)		50	25				
Each independent claim over 3 (including Reissues)		210	105				
Multiple dependent claims		370	185				
Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	Multiple Dependent Claims Fee	Fee Paid (\$)		
-20 or HP	x	=					
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims	Extra Claims	Fee(\$)	Fee Paid (\$)				
-3 or HP	x	=					
HP = highest number of independent claims paid for, if greater than 3							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee(\$)	Fee Paid(\$)			
-100	/50	(round up to a whole number)	x	=			
	Fee Paid(\$)						
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Petition for 3 month extension of time (\$1110) and Appeal Brief fee (\$540)	1650						

## SUBMITTED BY

Signature


Registration No.  
(Attorney/Agent)

44,401

Telephone

(312) 775-8000

Name (print/type)

John A. Wilberg

Date

October 6, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PAGE 4/25 \* RCVD AT 10/6/2008 10:32:13 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-5/26 \* DNIS:2738300 \* CSID: \* DURATION (mm:ss):10:00